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\*\* CONTINUING DATA \*\*\*\*\* *RM*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
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IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature <i>M. A. M. A. S. T.</i> Initials			

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TITLE  
 Drug solution container with a connector for communicating

☐ All Fees